

REQUESTOR NAME: Joni Hunt				
ORGANIZATION		TYPE OF ORGANIZATION (501(c)(3), government, other-explain):		
Flourish Point, Inc		Nonprofit waiting for 501c3 status		
ORGANIZATION ADDRESS	CITY	COUNTY	STATE	ZIP CODE
343 E 4th S Ste 238	Rexburg	Madison	ID	83440
EMAIL ADDRESS		REQUESTOR'S PHONE NUMBER		
jonimmt@gmail.com		530-949-4774		
DATE OF REQUEST		AMOUNT OF FUNDS REQUESTED (not to exceed \$1000.00)		
08/16/2021		\$1000.00		
PLEASE DESCRIBE YOUR REQUEST, EVENT, OR ACTIVITY (how you plan to use the money), INCLUDING PURPOSE AND DESIRED OUTCOMES:				
<p>Flourish Point is a non-profit organization, anticipating 501c3 approval by the end of 2021, created to serve the LGBTQ+ community in Madison County and the surrounding areas. Our mission is to provide compassionate, evidence-based, accessible, and affordable resources for people who identify (or are questioning) as LGBTQ+ in Madison County and surrounding areas. One of our most popular services is group counseling. Four to ten participants come each week for a 90 minute session led by a licensed therapist who teaches healthy practices and coping skills.</p> <p>Many of our clients are college students at Brigham Young University-Idaho who come seeking hope and safety in solidarity. However, they are often impoverished and afraid to ask for financial assistance for counseling from friends and family members because it would likely "out" them once it became clear where services were originating from. Therefore they come to us seeking subsidized and free mental health services.</p> <p>Flourish Point is requesting \$1000 to help such clients pay for their group counseling sessions. Each client first sees the therapist for an intake session (\$150) to make sure they are a good fit for the group, then each subsequent group session is \$25. Therefore, \$1000 would cover these services for two clients for 14 weeks (or one semester). The desired outcome is to remove barriers and make receiving mental healthcare affordable for the underserved LGBTQ+ population.</p>				
TO BE FILLED OUT BY R7BHB				
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No - Reason: _____				
R7BHB Representative: _____ Date: _____				
EIPH Representative: _____ Date: _____				